



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIBDATASHEET

Bib Data Sheet

CONFIRMATION NO. 1898

SERIAL NUMBER 10/657,144	FILING DATE 09/09/2003 RULE	CLASS 434	GROUP ART UNIT 3714	ATTORNEY DOCKET NO. IMMR023/05US
-----------------------------	---------------------------------------	--------------	------------------------	-------------------------------------

APPLICANTS

David Alexander, Purcellville, VA;

J. Michael Brown, Washington, DC;
 Eric Cabahug, Fairfax, VA; Philip J. Churchill, Silver Spring, MD;
 Robert F. Cohen, Burtonsville, MD;
 Ben Feldman, McLean, VA;
 Gregory L. Merrill, Chevy Chase, MD;

** CONTINUING DATA *****

This application is a DIV of 09/237,969 01/27/1999
 which is a CIP of 08/923,477 09/04/1997 PAT 6,106,301
 which claims benefit of 60/025,433 09/04/1996
 and said 09/237,969 01/27/1999
 claims benefit of 60/072,672 01/28/1998
 and claims benefit of 60/105,661 10/26/1998
 and claims benefit of 60/116,545 01/21/1999

yes J2A

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/02/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY VA	SHEETS DRAWING 14	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

ADDRESS

22903
 COOLEY GODWARD LLP
 ATTN: PATENT GROUP
 11951 FREEDOM DRIVE, SUITE 1700
 ONE FREEDOM SQUARE- RESTON TOWN CENTER
 RESTON, VA
 20190-5061

TITLE

Interface device and method for interfacing instruments to medical procedure simulation systems

<p>FILING FEE RECEIVED 750</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<p><input type="checkbox"/> All Fees</p> <p><input type="checkbox"/> 1.16 Fees (Filing)</p> <p><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</p> <p><input type="checkbox"/> 1.18 Fees (Issue)</p> <p><input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Credit</p>
--	--	--